

ISSUE SLIP STAPLE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMW	71802	7/8/99
O.I.P.E. CLASSIFIER	SW	32	9/1/03
FORMALITY REVIEW	DM	70223	9/21/03 3/8/04

INDEX OF CLAIMS

✓ Rejected N Non-elected
 • Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	M N N N N N N N
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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